## UTILITY PATENT APPLICATION **TRANSMITTAL**

Under the Paperwork Reduction Act of 1995, no persons are required to	respond to a collection of inform	ation unless it displays a valid OMB control number.	
UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No.	068758.0209  Johan Sjostrom	
	First Inventor		
	Title	A Differential Transistor	
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.	EV449865238US	

= :	PPLICATION ELEMENTS  ter 600 concerning utility patent application contents.	ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450					
(Submit an Applicant See 37 Cl 3. Specificati (preferred a - Descriptiv - Cross Ret - Statemen - Reference or a comp - Backgrou - Brief Dess - Detailed I - Claim(s) - Abstract c  4. Drawing(s  5. Oath or Declare a. Newly  b. Copy f  (for co  i. DE  Sigr  nan  1.63	ion [Total Pages1]  management set forth below)  re title of the invention ference to Related Applications t Regarding Fed sponsored R & D e to sequence listing, a table, outer program listing appendix nd of the Invention many of the Invention cription of the Drawings (if filed) Description of the Disclosure  s) (35 U.S.C. 113) [Total Sheets1]	P.O. Box 1430					
	ING APPLICATION, check appropriate box, and sup ving the title, or in an Application Data Sheet under 3	ply the requisite information below an					
Continuat	ion Divisional Continua	tion-in-part (CIP) of prior application	on No.: PCT/SE02/02243				
Prior application infor	rmation: Examiner	Art Unit:					
For CONTINUATION	OR DIVISIONAL APPS only; The entire disclosure of th	e prior application, from which an oath	or declaration is supplied under Box				
The incorporation of	part of the disclosure of the accompanying continuation an only be relied upon when a portion has been inadver	tently omitted from the submitted application	cation parts.				
	19. CORRESPON	DENCE ADDRESS					
Customer	Number:	OR Corre	spondence address below				
Name Ar	ndreas Grubert						
Addense Ba	ker Botts L.L.P.						
0.4	910 Louisiana, One Shell Plaza						
<u> </u>	ouston	State TX Zip Code 77002-4995					
<u></u>	1	elephone 713-229-1964	Fax 713-229-7764				
Name (Print/Type)	Bruce W. Slayden II	Registration No. (Attorney/Agent)	33,790				
Signature	Suce W. Sarden &		Date May 19, 2004				

This collection of information is required by 37 CFR / 53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it displays a valid OMB control number.

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL			Complete if Known					
			Application Number		Numb	er		
for FY 2004 Effective 10/01/2003. Patent fees are subject to annual revision.		I	Filing Date			May 19, 2004	May 19, 2004	
			First Named Inventor		d Inver	Johan Sjostrom	Johan Sjostrom	
		Examiner Name		lame				
Applicant claims small entity status. See 37 CFR 1.27			Art Unit					
TOTAL AMOUNT OF PAYMENT	(\$) 810.00		Attorney Docket No.		cket N	lo. 068758.0209	068758.0209	
METHOD OF PAYMENT (check	all that apply)	FEE CALCULATION (continued)						
Check Credit card Money Order  Deposit Account:  Deposit Account  02-0383	Other None				l Entity Fee		Fee Paid	
Account Number Deposit Account Name Baker Botts L.L.P.		1051 1052	50	2051 2052	25	Surcharge - late filing fee or oath Surcharge - late provisional filing fee or cover sheet		
The Director is authorized to: (check all that apply)  Charge fee(s) indicated below  Charge any additional fee(s) or any underpayment of fee(s)		1053 1812 1804	2,520		2,520	Non-English specification  For filing a request for ex parte reexamination  Requesting publication of SIR prior to  Examiner action	·	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.			1,840* 110	l	•	Requesting publication of SIR after Examiner action  Extension for reply within first month		

		DAL CILL ATION		1251	110	2251	55	Extension for reply within first month	
		CALCULATION		1252	420	2252	210	Extension for reply within second month	
	FILING FEE							Extension for conty within third month	
Large Entity	Small Entity			1253	950	2253	4/3	Extension for reply within third month	
Fee Fee Code (\$)	Fee Fee Code (\$)	Fee Description	Fee Paid	1254	1,480	2254	740	Extension for reply within fourth month	·
1001 770	2001 385	Utility filing fee	[770.00]	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340	2002 170	Design filing fee	770.00	1401	330	2401	165	Notice of Appeal	
1003 530	2003 265	Plant filing fee		1402	330	2402	165	Filing a brief in support of an appeal	
1004 770	2004 385	Reissue filing fee		1403	290	2403	145	Request for oral hearing	<u> </u>
1005 160	2005 80	Provisional filing fee		1451	1,510	1451	1,510	Petition to institute a public use proceeding	
	l	SUBTOTAL (1) (\$) 7	70.00	1452	110	2452	55	Petition to revive - unavoidable	
				1453	1,330	2453	665	Petition to revive - unintentional	
2. EXTRA	CLAIM FEE	S FOR UTILITY AN		1501	1,330	2501	665	Utility issue fee (or reissue)	
		Extra Claims below	Fee Paid	1502	480	2502	240	Design issue fee	
Total Claims		0** = X	] =[0	1503	640	2503	320	Plant issue fee	
Independent Claims	<u>.</u>	3** =	=[0]	1460	130	1460	130	Petitions to the Commissioner	
Multiple Dep	endent		J╡	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
Large Entity				1806	180	1806	180	Submission of Information Disclosure Stmt	
Fee Fee Code (\$)	Fee Fee Code (\$)		_	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	40.00
1202 18	2202	9 Claims in excess of 2	0	1809	770	2809	385	Filing a submission after final rejection	
1201 86	2201 4	13 Independent claims in	excess of 3					(37 ČFR 1.129(a))	
1203 290	1	15 Multiple dependent cl		1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1204 86	2204 4	13 ** Reissue independe over original patent		1801	770	2801	385	, , , ,	
1205 18	2205	9 ** Reissue claims in e	excess of 20	1802	900	1802	900	Request for expedited examination	

SUBMITTED BY	(Complete (if applicable))				
Name (Print/Type)	Bruce W. Slayden JI	Registration No. (Attorney/Agent)	33,790	Telephone	713-229-1234
Signature	Druce W. Sarden &			Date	May 19, 2004

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

(\$) 40.00

SUBTOTAL (3)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

(\$)<sup>0</sup>

SUBTOTAL (2)

\*\*or number previously paid, if greater; For Reissues, see above